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<b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2009</b> (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)		Docket Number (Optional) 29729/38914
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Application Number	10/590,690-Conf. #2874	Filed	May 21, 2007
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For Target for B-Cell Disorders

Art Unit	1644	Examiner	R. Schwadron
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This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

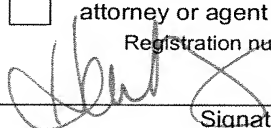
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):

		<u>Fee</u>	<u>Small Entity Fee</u>	
<input checked="" type="checkbox"/>	One month (37 CFR 1.17(a)(1))	\$130	\$65	\$ 65.00
<input type="checkbox"/>	Two months (37 CFR 1.17(a)(2))	\$490	\$245	\$
<input type="checkbox"/>	Three months (37 CFR 1.17(a)(3))	\$1110	\$555	\$
<input type="checkbox"/>	Four months (37 CFR 1.17(a)(4))	\$1730	\$865	\$
<input type="checkbox"/>	Five months (37 CFR 1.17(a)(5))	\$2350	\$1175	\$

- ☒ Applicant claims small entity status. See 37 CFR 1.27.
- ☐ A check in the amount of the fee is enclosed.
- ☒ Payment by credit card. Form PTO-2038 is attached.
- ☐ The Director has already been authorized to charge fees in this application to a Deposit Account.
- ☒ The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 13-2855.

**WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**

- I am the ☐ applicant/inventor.
- ☐ assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).
- ☒ attorney or agent of record. Registration Number 45,790
- ☐ attorney or agent under 37 CFR 1.34.  
Registration number if acting under 37 CFR 1.34 \_\_\_\_\_

  
\_\_\_\_\_  
Signature

August 26, 2009  
\_\_\_\_\_  
Date

Heather R. Kissling  
\_\_\_\_\_  
Typed or printed name

(312) 474-6300  
\_\_\_\_\_  
Telephone Number

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ Total of 1 forms are submitted.